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04/05/2004

PEACOCK MYERS AND ADAMS P C
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| | |
|---------------------------|--------------------|
| Deborah A. Peacock | (Depositor's name) |
| | (Signature) |
| April 21, 2004 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/738,045 | 12/15/2000 | Thomas M. Shay | 37000UT9918 | 2319 |

TITLE OF INVENTION: FULL-DUPLEX OPTICAL COMMUNICATION SYSTEM

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | YES | \$665 | \$0 | \$665 | 07/06/2004 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|---------------|----------|----------------|
| TRAN, DZUNG D | 2633 | 398-041000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

- 1 **Deborah A. Peacock**
 2 **Andrea L. Mays**
 3 **Peacock Myers & Adams**

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

New Mexico State University**Las Cruces, New Mexico USA****Technology Transfer Corporation**Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

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(Authorized Signature)

(Date) **Apr 21, 2004****Deborah A. Peacock**

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02 FC:8001****665.00 OP
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